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ANNUAL REPORT

UPON THE

SCHOOL HEALTH SERVICE

FOR THE YEAR 1963

BY

JAMES L. RENNIE

M.D., F.R.F.P.S. (Glas.), D.P.H.

PRINCIPAL SCHOOL MEDICAL OFFICER



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STAFF

Principal School Medical Officer, Medical Officer of Health	} James L. Rennie, M.D., Ch.B., F.R.F.P. & S. (G), D.P.H.
School Medical Officers and Assistant Medical Officers of Health	{ J. C. B. Craig, M.D., Ch.B., D.P.H. (To 31/10/63) D. L. Wilson, M.B., Ch.B., D.P.H., D.T.M. & H.
Principal School Dental Officer	T. W. Gregory, L.R.C.P. & S.E., L.D.S. (Ed.)
School Dental Officers	Mrs. M. Herd, L.D.S., R.C.S.(Eng.), B.D.S.(London) (To 31/1/63). Miss E. Rae, L.D.S.(Manchester) Mr. H. W. Freer, L.D.S. (From 13/5/63).
Anaesthetist (Part-time)	R. L. McMillan, M.B., Ch.B., D.A.
Consultant Paediatrician (Cerebral Palsy) Part-time	E. Ellis, M.A., M.B. B.Chir., D.C.H., etc.
Consultants :	
(By arrangement with Newcastle Regional Hospital Board)	
Ear, Nose and Throat Surgeon (Part-time)	R. S. Venters, M.B., Ch.B., F.R.C.S.
Ophthalmologist (Part-time)	A. R. Wear, M.B., Ch.B., D.O.
Orthopaedic Surgeons (Part-time)	W. McKechnie, M.B., Ch.B., F.R.C.S. J. C. Foster M.B., Ch.B., F.R.C.S.

Psychiatrist (Part-time)

A. O. A. Wilson, M.B., Ch.B., D.P.M.
(To March, 1963).

A. Stevenson, L.R.C.P., L.R.C.S.(Ed.),
L.R.F.P.S.(Glas.), D.P.M.(Eng.)
(From July, 1963).

Educational Psychologist Miss M. Y. Cameron, M.A., Ed.B.

Psychiatric Social Worker Mr. E. L. Mayoh, A.A.P.S.W.
(From 2/12/63).

Teacher of Deaf Mrs. M. Parkinson

Mental Welfare Officers Miss E. Barnett, M.A., Cert. Soc. Sc.
(To 31/8/63).
Mr. T. A. Foster, A.A.P.S.W.
(From 30/12/63).

Speech Therapist Miss V. Hind, L.C.S.T.

Physiotherapist J. M. Smith, M.C.S.P.

Orthoptist (Part time) Vacant.

†Superintendent Health Visitor
Miss M. S. Moore, S.R.N., R.S.C.N.,
H.V. Cert.

Health Visitors

†Miss E. M. Armit, S.R.N., S.C.M., H.V. Cert,
†Mrs. E. Broatch S.R.N., H.V. Cert.
†Miss M. K. S. W. Carey, S.R.N., S.C.M., H.V. Cert,
†Miss A. P. Cloudsley, S.R.N., H.V. Cert.
†Mrs. R. M. Corbett, S.R.N., S.C.M., H.V. Cert., Q.N.
†Miss M. I. Craig, S.R.N., S.C.M., H.V. Cert.
†Miss I. Forsyth, R.G.N., S.C.M., H.V. Cert.
†Miss A. Little, S.R.N., H.V. Cert.
†Mrs. M. I. McGlone, S.R.N., S.C.M., H.V. Cert,
†Miss R. Moscrop, S.R.N., H.V. Cert.
†Miss W. G. Porthouse, S.R.N., S.C.M., H.V. Cert,
†Miss J. M. Elliot, S.R.N., S.C.M., H.V. Cert.

School Nurses and Tuberculosis Visitors

Miss E. R. Ferguson, S.R.N., S.R.F.N., T.A., Cert.
Miss M. Yarker, S.R.N., S.C.M.

Temporary School Nurse Mrs. M. D. Palmer

Dental Attendants Miss T. Noctor
Mrs. J. Blake
Miss E. Smith

Chief Administrative Assistant, Health and Welfare Department
Mr. L. Oates

Senior Clerk—Miss M. H. Bowman

Clerks—

Miss M. M. Shovlin Miss C. Metcalf.
Mrs. A. Hudson Miss F. J. Ralph

† Combined duties as Health Visitor and School Nurse.



Mr. Chairman, Ladies and Gentlemen,

I have pleasure in submitting herewith my seventeenth Annual Report on the School Health Service.

There have been a number of changes of staff as will be seen from perusal of the table at the beginning of the report. Among these mention ought to be made of the retirement of Dr. James C. B. Craig after 32 years service with this Authority. Dr. David L. Wilson, Assistant Medical Officer of Health and School Medical Officer was appointed Deputy Medical Officer of Health and Deputy Principal School Medical Officer on the 16th October, 1963.

As will be seen from the section on Medical Inspection contributed by Dr. Wilson, the experiment with selective medical examinations in school is proving a success. Health Education though a function of the Health Committee is carried out in schools and for the first time a section on this subject is included in this report. The drive against cigarette smoking was carried out more forcibly in schools by the visit of a specialist team from the Central Council for Health Education.

I should like to thank you for your support throughout the year, the Director of Education and his staff and all other officers of the Corporation for their co-operation, and lastly, but by no means least, the staff of the Health and Welfare Department on whose loyalty and industry the success of the Service depends.

I am,

Mr. Chairman, Ladies and Gentlemen,

Your obedient Servant,

JAMES L. RENNIE,

Principal School Medical Officer.

STATISTICAL SUMMARY

The following is a summary of the work undertaken by the School Health Service of the City of Carlisle during the year.

No. on Rolls	...	...	...	...	...	11707
No. of Routine Medical Inspections	...	...	...	...	...	3520
No. of above children referred for treatment	...	...	...	...	...	905
No. of above children referred for observation	...	...	...	...	...	895
No. of Special Inspections	...	...	...	...	...	2060
No. of re-inspections	...	...	...	...	...	2541
Total No. of Inspections	...	...	...	...	...	8121
No. of parents present at routine Medical Inspections	...	...	...	...	...	2198
No. of visits to Schools by School Medical Officers	...	...	...	...	...	241
No. of Visits to Schools by Health Visitors	...	...	...	...	...	740
No. of home visits by Health Visitors	...	...	...	...	...	493
No. of cases treated at Minor Ailment Clinics	...	...	...	...	...	534
No. of attendances at Minor Ailment Clinics	...	...	...	...	...	2404
No. of School visits paid by Dental Officers	...	...	...	...	...	44
No. of children examined by Dental Officers	...	...	...	...	...	7089
No. of children found to require dental treatment	...	...	...	...	...	5071
No. of children treated by School Dental Officers	...	...	...	...	...	2281
No. of visits to Schools paid by Educational Psychologist	...	...	...	...	...	131
No. of children examined by Educational Psycholo- gist in School, at Clinic, or in their own homes	...	...	...	...	...	295
No. of family units dealt with by Psychiatric Social Worker	...	...	...	...	...	46
No. of children who received Speech Therapy at Clinic	...	...	...	...	...	153
No. of visits to H. K. Campbell Special School paid by Physiotherapist	...	...	...	...	...	74
No. of children treated by Physiotherapist in Special School for Physically Handicapped Children and at Orthopaedic Clinic	...	...	...	...	...	24

MEDICAL INSPECTION

By David L. Wilson, M.B., Ch.B., D.P.H., D.T.M. & H.,
Deputy Principal School Medical Officer.

The pilot scheme of selective examination started this year in Greystone, Brook Street, Morton Park Junior, Morton Park Infants' and Newlaithes Schools. In these schools the intermediate routine medical inspection of 11 year old children is replaced by the examination of selected children only. Children with known or suspected defects, or a history of illness, or emotional or behavioural difficulties, or about whom parents or teachers are concerned are selected for full medical examinations including an opportunity for confidential discussion with the parents. The School Medical Officer makes the selection in consultation with the Head Teacher and School Nurse, using confidential questionnaires completed by parents as a basis. Previous medical records, teachers' reports and what is known of the home backgrounds are also taken into account. Children outwith the age-group who are causing particular concern may also be included. Such selection focuses attention on those children most likely to need medical advice or treatment. About half the number of children in the age-group were called for examination, the parents of the remainder being informed that, while no examination was at present considered necessary, their children would have a routine medical inspection before they left school.

Where such a scheme of selective medical examination operates it is important that the initial routine medical inspection of infants be sufficiently thorough to detect any defect requiring treatment or likely to cause trouble. The examination of infants in these schools is therefore comprehensive and includes urine tests, a screening test of vision and confidential discussion with parents. To allow the children to settle down in school and their teachers to form some assessment of them these examinations are normally held in the children's second term at school.

Since visual defects can arise unknown to child or parent the school nurses are carrying out more frequent tests of vision in these schools. This should ensure that the vision of each child is tested every second year.

This pilot scheme has worked well and gained the approval of the teachers, nurses and doctor concerned. In

particular and increased liaison and co-operation between the School Medical Officer and Head Teachers is most beneficial to the School Health Service. I should like to thank all those who have taken part and in particular the clerical staff for whom this alteration in the established routine has meant much additional work. The success of this scheme indicates that it should be extended to other City schools.

During the year, 3520 children were presented for periodic examination, 62 per cent of them being accompanied by their parents. No defect was observed in 1720 of these children, but in the remaining 1800 scholars 2629 abnormalities were noted. In addition 2060 children were submitted for special examinations at the request of school teachers, school nurses, etc. The defects found at these periodic and special examinations are set forth in Table 1.

Eye tests were carried out on 870 pupils aged 7 years and as a result of these examinations 32 were referred to the eye specialist for treatment and 140 were noted for observation at subsequent visits.

TABLE 1.
FINDINGS OF MEDICAL INSPECTION

Defect or Disease	Periodic Inspections		Special Inspections	
	No. of Defects		No. of Defects	
	Requiring treatment	Requiring to be kept under observation, but not requiring treatment	Requiring treatment	Requiring to be kept under observation, but not requiring treatment
Skin	85	25	147	1
Eye	321	458	101	176
Ear	321	124	93	116
Nose and Throat	81	201	77	32
Lymphatic Glands	3	39	1	18
Speech	19	28	18	2
Heart and Circulation	4	14	4	1
Lungs	40	36	4	1
Nervous System	11	9	4	—
Orthopaedic Defects	208	251	125	20
Other Defects and Diseases (excluding Dental Diseases and Uncleanliness)	52	299	264	6
Total	1145	1484	838	373

COMMUNICABLE DISEASE

INFECTIOUS DISEASES

During the year, 990 cases of infectious disease were brought to the notice of the Principal School Medical Officer by formal notification or otherwise. The incidence of the various diseases is shown in Table 2.

The City has now been free from diphtheria for 14 years, and this is due in great part to the high acceptance rate of diphtheria immunisation. Although the Health Visitors and general practitioners, as well as the Clinic doctors do a great deal of work encouraging parents to accept immunisation for pre-school children, a considerable amount of propaganda is necessary in the schools to ensure that a high degree of immunity against this disease is maintained in the school population. Only by maintaining such immunity can we have reasonable hope of preventing this disease attacking our children.

TABLE 2

Table showing the incidence of the various infectious diseases in the school population.

Scarlet Fever	...	...	...	...	10
Measles	...	...	...	...	483
Whooping Cough	...	...	...	...	11
Food Poisoning (notified)	...	...	...	...	2
Pneumonia	...	...	...	...	1
Mumps	...	...	...	...	13
Chickenpox	...	...	...	...	470

CLEANLINESS

A considerable amount of staff time continues to be absorbed in cleanliness inspections, etc., but the intensive supervision of known offenders commenced in 1962 would appear to be bearing fruit. Table 3 shows the results of such inspections throughout the year.

SPECIAL PROPHYLATIC MEASURES

Although the Health Committee is primarily responsible for these measures, many of them are carried out on School Clinic premises and arrangements for these procedures are usually made with the help of the Head Teachers who have continued to give their support to the various schemes. This help is much appreciated.

Immunisation against Diphtheria, Tetanus and Poliomyelitis as well as Small-pox vaccination is available and the acceptance rate in the City is very satisfactory.

TABLE 3

The number of Cleanliness Inspections and the incidence of infestation in the school population as a result of these examinations.

Total number of examinations	...	...	17867
Number of individual children found to be infested with lice	...	...	204
Number found to be flea-bitten	...	...	1
Number of these allowed to continue at school under supervision	...	...	183
Number of children excluded from school			22
Number of individual children in respect of whom Official Cleansing Notices were issued	...	...	64
Number of individual children in respect of whom Official Cleansing Orders were issued	...	...	—

PREVENTION OF TUBERCULOSIS

The practice of offering a skin (Mantoux) test to all six year children was continued. 721 children were so tested and 23 of them who showed a positive reaction were referred to the Chest Physician for full investigation.

B.C.G. Vaccination was offered to all children around the age of 13 and to some 12 year olds. It is proposed at an early date to offer this form of protection to all children at the age of 12. Table 4 sets forth the number of such children tested and vaccinated.

TABLE 4

No. of children skin tested	...	...	1280
No. of above who gave positive reaction to Mantoux Test	...	...	109
No. who received B.C.G.	...	...	1151

The Mass Radiography Unit was available for pupils over 15 years and all school teachers were encouraged to attend for X-ray. Table 5 shows the number of pupils (over 15) and teachers examined in the years 1961 to 1963.

TABLE 5

	1961	1962	1963
No. of pupils examined	599	900	817
No. of teachers examined	171	178	167

MEDICAL TREATMENT

As indicated in previous reports your Medical Officers devote much more time to ascertainment of conditions requiring special educational treatment and comparatively little to medical treatment of minor conditions.

The main School Clinic is at No. 2 George Street, and provides for:—

- (1) Special inspections and examinations by School Medical Officers.
- (2) Minor Ailment Clinic.
- (3) Scabies, etc. Cleansing Station.
- (4) Immunisation and Vaccination Clinics.
- (5) Ophthalmic Clinic.
- (6) Orthoptic Clinic.
- (7) Ear, Nose and Throat Clinic.
- (8) Audiometric Clinic.
- (9) Speech Therapy Clinic.
- (10) Accommodation for Educational Psychologist.
- (11) Child Guidance Centre.

This Clinic will have to be demolished in the near future to allow for the construction of the "relief road." Plans are now being drawn up for its replacement.

The Health Department Clinic at Eildon Lodge, 50 Victoria Place, provides on behalf of the Education Authority, facilities for:—

- (1) Priority Dental Services.
- (2) Orthopaedic Clinic.
- (3) Medical Officer's Special Examination Clinic.
- (4) Immunisation and Vaccination Clinics.

The Hearing Guidance Clinic was held at 28 Victoria Place until March, 1964. It is now held in the Civic Centre pending the availability of accommodation in the new clinic which will replace the George Street Clinic.

The Clinic at Inglewood Infant's School is used for immunisation and vaccination sessions as well as for minor ailment clinics.

MINOR AILMENTS

The amount of medical treatment as opposed to specialised investigation carried out at the School Clinic remains restricted. During the year 529 pupils were treated and they made 2404 attendances.

In addition, 5 cases of scabies attended for advice and treatment; all were treated at the Cleansing Centre.

DENTAL INSPECTION AND TREATMENT

By T. W. GREGORY, L.R.C.P.S., L.D.S.
Principal School Dental Officer

We lost the services of Mrs. M. Herd, B.D.S., in January, and were not able to get a replacement till mid-May, when Mr. H. W. Freer, L.D.S., commenced duty as a full-time officer. Our professional staff, however, for the year under review was equivalent to two and two-thirds dental officers as compared with two and a half for the previous year.

The total number of pupils inspected shows an increase as compared with the preceding year — 7089 as against 5546. Likewise the total actually treated has increased—2281 as compared with 1769 in 1962.

Some comment is called for regarding the increase of extractions and decrease in conservative treatment against the recent desirable trend. I attach no significance to the former, worthy of your attention, but I submit that the latter is probably due mainly to two factors. First, the reduced number of half-days devoted to treatment (owing to sick-leave) and secondly, the increased number of non-attenders. This latter tendency is disappointing in view of the fact that ample notification of appointments is given to both parents and Headteachers. An endeavour is also made to fill in cancelled appointments when received in time to do so.

In view of the widespread incidence of dental caries, it is disappointing that no progress has been made in this area towards increasing the fluorine content of the water to the recommended level, and obviously more dental staff will, in any case, be required to cope adequately with the need. Thirty-six pupils were supplied this year with artificial teeth.

The figures for Orthodontic Treatment show a further expansion. 68 cases were commenced and 39 completed during this year. Prosthetic work is also carried out at these sessions. 31 cases were referred to the Consultant Orthodontist for treatment or advice, twelve of which he himself took under his care. Three pupils were referred to the Oral Surgeon for treatment.

Members will be interested to know that the X-ray Apparatus acquired for the Clinic, has proved a considerable asset, enabling 122 pupils to have X-rays taken when wanted, conveniently and without loss of time.

Dental Health Education is not neglected, and we endeavour to fulfil our role in this respect with the help of the Health Visitors, particularly one of these specially assigned to Health Education. A proportion of our time was, as usual, devoted to Maternity and Child Welfare patients. This amounted to the equivalent of 100 sessions, slightly less than last year.

I should like to conclude by thanking our Consultant Anaesthetist and your Medical Staff for their helpful co-operation, and add an appreciation of the loyal service given by our technician and surgery assistants.

SPECIALIST SERVICES

The provision of Specialist Services has been continued in conjunction with the Hospital Authorities. Ear, Nose and Throat; Eye; Orthopaedic; and Psychiatric (Child Guidance) Clinics have been conducted by hospital specialists in your clinics while Dr. Ellis the Medical Director of Percy Hedley School for Spastics has paid periodic visits to the City in connection with the ascertainment, treatment and control of children suffering from Cerebral Palsy and allied conditions. A "closed" Paediatric Clinic has been conducted at the Cumberland Infirmary by Dr. John Platt and your staff have been able to have the benefit of his help in difficult cases.

EAR, NOSE AND THROAT DEFECTS

Mr. R. S. Venter, F.R.C.S., held 9 sessions during the year at which he examined a total of 243 (225 school and 18 pre-school) children referred for a specialist's opinion by a family doctor or a Local Authority Medical Officer with the family doctor's knowledge. A number of the children referred were those found to have some hearing loss at routine testing. 126 (118 school and 8 pre-school) children received surgical treatment at the City General Hospital while four school children were admitted for non-operative treatment. Two school children and one pre-school child were supplied with transistor hearing aids.

HEARING TESTS

Practically all children with hearing defects of importance are ascertained and given treatment or guidance before reaching school age. Nevertheless all school entrants are screened by pure tone audiometer to ensure that no partially hearing child is missed. Audiometric examinations are also undertaken on older children who are suspected of deafness by the teaching staff, are suffering from speech defects or who are backward in school work.

Children found to have a hearing loss are examined by a School Medical Officer and if necessary referred to the consultant with the family doctor's knowledge.

Table 6 gives the number of children affected by these procedures.

TABLE 6

No. of Schools sessions	...	...	...	56
No. of school children screened	...	...	...	1269
No. of pre-school children screened	...	...	...	40
No. of Clinic sessions	...	...	...	80
No. of above children who were found to require full Audiograms	...	...	...	237
Total No. of Audiograms carried out on these and other children, including repeats	...	...	...	390
No. of children referred to E.N.T. Specialist	...	...	...	66

HEARING GUIDANCE

(by Mrs. M. Parkinson, Teacher of the Deaf).

The work of screening and ascertainment is referred to in the previous section.

Of the nineteen deaf or partially hearing children in the City seven attend schools for the deaf, six attend City schools and three are of pre-school age.

All the pre-school children attend the clinic weekly with their mothers to receive guidance. Two of these children also attend the City Day Nursery for two days each week which has done a great deal to help their social development.

Two children attending City schools attended the clinic weekly for lip-reading and remedial teaching. One of these has made such progress that she has stopped coming to the clinic.

Visits have been made to several of the City schools attended by hard-of-hearing children to consult with Head and class teachers.

Three extra-district children attended the clinic regularly. Two of these attend primary schools in Dumfriesshire, the other is a pre-school child.

Of the five other children who have been referred to the clinic two have now been admitted to schools for the deaf at Edinburgh and Southport and three attended on only a few occasions.

During the school holidays appointments have been made for City children at schools for the deaf to attend the clinic.

Table 7 shows the work carried out by the Teacher of the Deaf at the Hearing Guidance Clinic.

TABLE 7

No. of City cases	...	...	...	...	19
No. of attendances	...	...	...	...	149
No. of extra-district cases	...	...	...	...	9
No. of attendances	...	...	...	...	109

(Note.—The number of attendances were relatively low due to the fact that Mrs. Parkinson had unavoidably to be on leave during part of the school year.)

OPHTHALMIC CLINIC

During the year Dr. A. R. Wear, the Ophthalmologist held a clinic at George Street on 46 occasions. He examined 520 (486 school and 34 pre-school) children, the majority of whom were in attendance at maintained schools. Of the school children 156 were being examined for the first time, and 330 were being re-examined, generally to ascertain whether they required a change of spectacles. In 121 of the latter cases the existing spectacles were found satisfactory but among all others new spectacles were required in 265 cases. Of the school children examined 57 were found to be suffering from some degree of squint.

Orthoptic Treatment

Owing to the absence of an Orthoptist Cumberland County Council was unable to afford us the part-time service of such an officer.

ORTHOPAEDIC TREATMENT

Mr. William McKechnie, F.R.C.S., Edin., or Mr. J. C. Foster, F.R.C.S., held 24 sessions at Eildon Lodge at which 1081 (682 school and 399 pre-school) children were examined. The School Orthopaedic Clinic provides for the long

term follow up of school and pre-school children who do not require the resources of a hospital at each visit. It relieves the pressure on the hospital out-patient department as well as serving as a consultative centre.

Physiotherapy

(By Mr. J. M. Smith, the Physiotherapist)

During the year 24 school children and 9 pre-school children attended Eildon Lodge for treatment, and Table 8 sets forth the work undertaken.

Five of the school children and 4 pre-school children were referred by Orthopaedic Specialists from the Cumberland Infirmary.

TABLE 8

		SCHOOL		PRE-SCHOOL	
		No. of Children Treated.	No. of Treatments Given.	No. of Children Treated.	No. of Treatments Given.
Flat Foot	...	10	75	1	13
Postural	...	4	31	—	—
Spastics	...	6	352	5	195
Specials	...	4	165	3	83
U.V.R.	...	—	—	—	—
		24	623	9	291

During the school terms two afternoon visits were made each week to the H. K. Campbell School for the treatment of children suffering from Cerebral Palsy.

In addition to physiotherapy treatment at the clinic, appliances worn by children are checked and forms of application for orthopaedic footwear and insoles are issued.

Owing to the shortage of Physiotherapists at the Cumberland Infirmary your officer was seconded for a number of sessions each week. This keeps him in touch with other aspects of physiotherapy not undertaken at a School Clinic and serves to integrate both services.

SCHOOL MENTAL HEALTH SERVICE

(By Miss Mary Y. Cameron, M.A., Ed.B.,
Educational Psychologist)

During the year, 295 children (219 boys, 76 girls) were dealt with at the Centre. Of these, 106 (65 boys, 41 girls) had been referred before January, 1963 and continued to receive treatment, 24 (18 boys and 6 girls) were re-referred after having been previously discharged, and 165 (136 boys and 29 girls) were referred for the first time.

Table 9 shows by whom the children were referred.

TABLE 9

	B.	G.	Total
Head Teachers	113	34	152
School Medical Officer	16	8	24
Children's Officer	7	1	8
General Medical Practitioner	32	15	47
Psychiatric Social Worker	3	3	6
Mental Welfare Officer	1	—	1
Parents	8	5	13
Speech Therapist	6	1	7
Probation Officer	12	2	14
Director of Education	3	1	4
School Nurses and Health Visitors	9	3	12
School Welfare Officer	2	1	3
Medical Consultant	1	1	2
Other Sources	1	1	2
	<hr/> 219	<hr/> 76	<hr/> 295

There has been an increase over the previous year's figures in the number referred by Head Teachers and a slight decrease in the number referred by School Medical Officers but otherwise the proportion referred by the various agencies remains fairly constant.

Tables 10 and 11 show the distribution respectively, of age and intelligence of children attending the centre.

TABLE 10

Age in years	Under																	
	2	2+	3+	4+	5+	6+	7+	8+	9+	10+	11+	12+	13+	14+	15+	16+	17+	18+ Total
Boys	1	—	1	5	7	24	22	31	33	28	21	17	13	15	1	—	—	219
Girls	—	—	1	2	4	7	10	13	10	7	6	1	5	6	2	1	—	1 76
Total	1	—	2	7	11	31	32	44	43	35	27	18	18	21	3	1	—	1 295

Average Age — 8.9 years

TABLE 11

I.Q.														Not tested	Total
	40+	50+	60+	70+	80+	90+	100+	110+	120+	130+	140+	150+			
Boys	2	2	11	40	46	42	32	22	12	4	2	2	2	219	
Girls	1	4	4	17	15	12	5	8	2	—	1	—	7	76	
Total	3	6	15	57	61	54	37	30	14	4	3	2	9	295	

Average I.Q. — 85

Most of the children were between 7 and 9 years old. This is the age at which transfers are usually made to York School and it is therefore the policy of the teachers to refer for testing at about that age any child who has more than ordinary difficulty in learning. It is these children who cause the average I.Q. to be so much below the average of the whole population, (100).

There has been a marked increase in the number of children referred by the Psychologist and the School Medical Officer for ascertainment as educationally subnormal. (32 boys, 17 girls). Until this year, no child under 7 was so referred but now children are examined by the School Medical Officer as early as seems advisable and if he is satisfied without doubt that they lack the ability to profit by education in an ordinary school, their names are put on the waiting list for York School.

Tests of intelligence were administered to 80 children (60 boys and 20 girls), their parents were interviewed and offered advice, and where appropriate reports were sent to the Head Teacher, the Children's Officer, or the Probation Officer but no direct treatment was given.

The parents of 4 children (3 boys and 1 girl) refused treatment or ignored appointments and the parents of 8 others (5 boys, 3 girls) proved unco-operative after treatment had been started.

Ten children (9 boys, 1 girl) were on probation.

In 9 cases (6 boys, 3 girls) physical factors were prominent either as symptoms or causes. These included serious injury and psycho-somatic diseases such as asthma.

Two boys and two girls attended the speech therapist concurrently.

Table 12 shows the symptoms exhibited by the children who attended the Centre.

TABLE 12

	Boys	Girls	Total
General Backwardness	7	—	7
Backwardness in Reading	22	2	24
Backwardness in Arithmetic	—	—	—
Backwardness in Spelling	1	—	1
Backwardness in English	—	—	—
Anxiety and Obsessional States	12	8	20
Nightmares and Night Terrors	2	—	2
Enuresis and Soiling	42	15	57
Emotional Retardation and Regression	3	—	3
Unmanageable Behaviour	14	7	21
Aggression and Temper Tantrums	14	4	18
Truancy	11	1	12
Irregular Attendance	2	1	3
Pilfering	28	—	28
Untruthfulness	22	1	23
Malicious Mischief	3	1	4
Sexual Misbehaviour	4	1	5

Two boys were found to be in need of in-patient treatment but as there is no residential psychiatric unit for children in this area they had to be sent from the City, one to Newcastle and one to Edinburgh.

For the first two and a half months of the year, the Child Guidance Service continued, as in the latter part of 1962, to have the benefit of two psychiatrists, but Dr. A. O. A. Wilson left in March to take up an appointment in Morpeth and Dr. Gallacher continued by himself until Dr. Stevenson was appointed in July. Until October, the Clinic was again served by two psychiatrists but the exigences of the hospital service made it impossible for Dr. Gallacher to be spared for Child Guidance in the latter part of the year.

Miss Barnett continued to pay visits to the homes and to counsel the parents until she left the mental health service to join the staff of the Technical College in July. In December, a psychiatric social worker, Mr. Mayoh, was appointed so we start 1964 with a complete Child Guidance Team once again.

Table 13 shows how the psychologist's time was allocated.

TABLE 13

Psychological Investigations—				
(a) By Test	...	...	...	183)
(b) By parent-interview	...	...	...	72)
Visits to the Centre for educational and other therapy				
	...	...	...	450
Visits to the Centre for play therapy	...	...	...	131
Visits of parents to the Centre	...	...	...	254
Visits to homes	...	...	...	25
Visits to schools	...	...	...	131

A small group attended throughout the year for play therapy. The individuals comprising it changed from time to time.

As in former years, close co-operation has been maintained with the Health Visitors, the Probation Officers, the Children's Officer and his assistants, the School Welfare Officer, and the Head Teachers, all of whom have given invaluable support and help.

SPEECH THERAPY CLINIC

(by Miss Hind, L.C.S.T.)

The position at 31st December is shown in Table 14.

TABLE 14

	Boys	Girls	Total
Receiving treatment	51	20	71
Under observation or review	29	9	38
Awaiting treatment	13	3	16
	93	32	125

Table 15 sets forth the source of referrals while Table 16 indicates the conditions from which the children suffered.

TABLE 15

Source of referrals

	Boys	Girls	Total
Head Teachers	10	5	15
General Medical Practitioners	10	3	13
School Medical Officers	8	2	10
Medical Consultants	6	1	7
Parents	—	1	1
	34	12	46

TABLE 16

Conditions for which children were seen

					Boys	Girls	Total
Dyslalia	...	...	...	...	27	13	40
Stammer	...	...	...	...	33	3	36
Delayed Development and Dyslalia					15	10	25
*Cleft Palate	...	...	...	...	7	3	10
Stammer and Dyslalia			...	...	6	1	7
Articulatory Dyspraxia			...	...	3	1	4
Dysarthria	....	...	...	...	2	—	2
Voice Disorder		...	...	...	—	1	1
					93	32	125

* Other children with cleft palate have been seen at the Cumberland Infirmary.

During the year there were 51 visits to schools. Since September this number includes a weekly visit to H. K. Campbell School where 3 children are receiving treatment and 2 children under observation. There were also monthly visits to York School where several children have difficulty with speech.

Many teachers throughout the City have expressed concern about the very poor speech and language ability of a large number of the children entering school. This fact was also mentioned in the Speech Therapist's report for 1959. While some of these children tend to improve in the first few years in school they can be handicapped by their speech difficulties both intellectually and emotionally.

HANDICAPPED CHILDREN

Ascertainment of children requiring special educational treatment once again occupied much of the time of the School Medical Officers.

Table 17 sets forth the type of special education provided for City Children.

TABLE 17

In special residential schools for the Partially Sighted	4
In special residential schools for the Deaf	4
In special residential schools for the Partially Hearing	3
In special residential schools for Epileptic children	1
In special residential schools for Mal-adjusted children	1
In special day school for Educationally Sub-normal Children on 31st December, 1963	117
In residential special schools for Educationally Sub-Normal Children	5
In H. K. Campbell Special Day School for Physically Handicapped Children on 31st December, 1963	45
No. of children who received education from Peripatetic Teacher throughout the year:—	
In Cumberland Infirmary	1
In their own homes	15

59 children of school age suffered from severe sub-normality and were unsuitable for education in a school. 21 of these children were in institutions and the remainder with the exception of 4, attended the Junior Training Centre provided by the Local Health Authority.

Dr. E. Ellis visited the City on two occasions. He held assessment and supervisory clinics for children suffering from Cerebral Palsy and allied conditions and examined 15 children.

H. K. CAMPBELL SPECIAL DAY SCHOOL FOR PHYSICALLY HANDICAPPED CHILDREN

The number of pupils with physical handicaps requiring admission to this school has remained low. There were 51 children on the register in January, 8 were admitted to and 14 discharged from the school leaving the number of pupils at the end of December at 45. The average length of attendance of pupils was 2 years.

Table 18 indicates the type of condition which necessitated the child's requiring special educational treatment.

TABLE 18

Tuberculosis—				
Pulmonary (non-infectious)	...	...	...	2
Non-pulmonary	...	...	...	—
Bronchitis and Asthma	...	...	...	8
Debility	...	...	...	5
Heart Disease	...	...	...	5
Orthopaedic Defects including Spastics	...	...	...	14
Myopia and Partial Blindness	...	...	...	4
Muscular dystrophy	...	...	...	4
Haemophilia	...	...	...	1
Poliomyelitis	...	...	...	2
Bronchiectasis	...	...	...	2
Enuresis	...	...	...	1
Coeliac Disease	...	...	...	1
Apraxia	...	...	...	1
Aphasia	...	...	...	1
Epilepsy	...	...	...	4
Hiatus Hernia	...	...	...	1
Neurosis	...	...	...	1
Contractures following burns	...	...	...	1
Tumour of leg (Post-operative)	...	...	...	1

The physiotherapist visited the School twice weekly when he gave treatment to spastic and other children. Five children had the benefit of this treatment and 74 visits were paid to the School.

HEALTH EDUCATION

(by Dr. D. L. Wilson, Deputy Principal School Medical Officer).

During the year courses in Mothercraft were taken by two Health Visitors/School Nurses for senior girls in Harraby Secondary and Robert Ferguson schools and for day release students in the Technical College. The syllabus is wide, touching on many aspects of health which include nutrition, clothing and footwear, dental health, safety in the home and the prevention and control of infection.

During the week from 28th October to 4th November particular stress was laid on the danger to health of cigarette smoking. All secondary schools were visited by a mobile unit from the Central Council for Health Education. The two demonstrators spoke to all first year pupils, showing them the film "Smoking and You." In some schools

children in other classes also saw this film which demonstrates in telling fashion the health hazards and unpleasant aspects of cigarette smoking. Posters were displayed in all schools, appropriate pamphlets were provided for the use of teaching staff and the parents of all children who met the mobile team received a duplicated letter stressing the importance of their example and influence. Head Teachers commented most favourably on this campaign and it is hoped to arrange something similar each year.

Schools were also supplied with material for poster display on other topics which included dental health and food hygiene.

PHYSICAL EDUCATION

(by Miss B. M. Bromley, Adviser in Physical Education).

The work on the Physical Education side has continued to flourish with the help afforded by the Carlisle Education Authority in the form of better facilities and with the voluntary work of the Carlisle School Sports' Association, which gave young people the opportunity to pursue their selected activities from school to city, county and national standards.

On the facilities side, the Grammar School Gymnasium has been in use since Easter and has the most modern equipment available with the inclusion of a rock-climbing corner. The five courts have yet to be completed. The two new primary schools on the Morton Estate have had modern climbing equipment installed and the playing field sown for use. At the High School new tennis courts have been completed on land adjacent to the school to be used by them and possibly other schools in the area if available. In the new primary schools of Carlisle there is now the opportunity for the indoor lesson to be taken regularly during bad weather and with the playing field adjacent the young person is having the opportunity of all round development.

With the increase of secondary school building we will soon see all but two of our secondary schools with the opportunity of using indoor gymnasia alongside that of the playing fields, thereby ensuring a natural physical development of the pupil from the infant school to the secondary stage.

Physical education has a major contribution to make to the citizen of the future. It is important to train the

minds of the young people so that skills learnt in their school days can be usefully employed in their leisure hours when they have started work. During the past year the widening of the Physical Education syllabus at the High School has been followed by the Grammar School. Opportunity is given to pupils of the sixth forms for tuition in squash, fencing, badminton, golf, canoeing and fell-walking. This follows a need by the older pupils for more individual sports and in many cases an opportunity of excelling at a new sport which hitherto has eluded them.

PLAYING FIELDS

I am indebted to the Parks Superintendent for the continued maintenance of our school fields. The Authority now has approximately 160 acres of playing fields and gardens attached to schools. During the year the Technical College and Grammar School fields have been levelled and sown and with good weather conditions it is likely that some light use may be made of this land in the latter part of 1964. At York Place and Heysham Park, changing rooms have been completed. Along with Adelaide Street changing rooms this means that most of the fields used for youth activities have suitable changing rooms instead of the young people leaving their clothes on the fields.

During the year, schools have pursued their inter-school fixtures in all sporting events. County football, hockey, cricket and athletic events have been run in Carlisle by the various sports bodies, young people from the City schools being represented in the teams competing. The County Athletic Meeting, in which some eight hundred pupils take part, is to be staged in Carlisle on alternate years.

SWIMMING

For the third year running, the Carlisle team of girls won the Northern Counties Medley Relay, beating Liverpool into second place. W. Noble took fourth place in the Boys' Butterfly stroke at the National Schools' Championship at Bournemouth and T. Graham of Ash Lea Boys' School was fifth in the National Championships at Blackpool.

The Intensive Swimming Scheme in the primary schools taught 696 children to swim during the year or 67.7% of those attending lessons. At the end of the year primary

schools were asked for figures of swimmers and non-swimmers going in to secondary schools. The result of this was that 70% of the pupils can swim on entering secondary school.

AWARDS

Royal Life Saving Society ...	57 awards
Amateur Swimming Association	13 „
Proficiency Certificates ...	15 „
City Certificates: 1st Class	107 „
2nd Class	259 „
3rd Class	471 „

The County swimming team which competed in the Divisional Gala at Liverpool consisted of all Carlisle pupils, three of whom were selected to represent the Division at the National Championships at Bournemouth.

COURSES

Teachers' Courses were held during the year in judo, keep-fit and dancing, and athletics. The customary holiday courses for pupils have taken place during the holiday periods in soccer, athletics, tennis and cricket. A keep-fit residential weekend was held in the Spring at Dalston Hall. Twenty-seven ladies from our keep-fit classes in the City attended.

OUTDOOR ACTIVITIES

It has been the continued policy of the Authority to use the Y.M.C.A. Centre for a period of six weeks during the summer term. Each school, except the Grammar and the High Schools, has sent pupils to the centre for the first time. Some three hundred and sixty pupils have attended the course for a week, taking part in canoeing, rock-climbing, camping, map and compass work. One school attended an advanced course and selected pupils were also sent on Outward Bound Courses in Devon, Ullswater and Aberdovey. Twelve pupils also attended the forestry course at Lakeside during the Spring.

CONCLUSION

A great deal of work on the Physical Education side takes place out of school hours. To the men and women who give so freely of their leisure for the younger generation, I would extend my gratitude and hope that their work will be continued in future years

PROVISION OF MILK AND MEALS IN SCHOOLS

MILK

The majority of children take milk in school. On a set day in September, 1963, it was found that 8629 or 82.85% of scholars had partaken of milk. This compares with 8687 or 79.63% in 1962 and 8700 or 80.4% in 1961.

MEALS

Only a proportion of pupils take school meals. In Carlisle a large proportion of workers can go home for a mid-day meal and it is therefore not surprising that the children go home for a main meal at that time. On a set day in September a census of those taking school dinners was made and the results with comparative figures for 1962 are shown below.

	Free Meals	Paid Meals	Total	Percentage taking Dinner
1962	580	3527	4107	37.65
1963	623	3914	4537	43.56

CO-OPERATION OF VOLUNTARY BODIES

NATIONAL SOCIETY FOR THE PREVENTION OF CRUELTY TO CHILDREN

Close co-operation is maintained between the officer of this Association and the staff of the School Health Department, and any information available is freely exchanged.

CHILDREN'S SUNSHINE HOME, ALLONBY

This Home provided 43 children with a fortnight's holiday, and acknowledgments are tendered to the members of the Carlisle Rotary Club for the conveyance of the children to and from Allonby.

EMPLOYMENT OF CHILDREN AND YOUNG PERSONS

94 boys and 16 girls were referred for certification of fitness for employment under the Bye-laws in respect of employment of children and street trading, and all were found to be fit for employment.

EXAMINATION OF TEACHERS

53 candidates for appointment as Teachers by the Local Education Authority were examined, all of whom were found to be medically fit.

During the year the staff of this department examined and reported on 47 entrants to teachers' training colleges.

HOME VISITING

493 home visits were made by the Health Visitors in their capacity of School Nurses.

DEATHS OCCURRING IN SCHOOL CHILDREN

It is with regret that I have to report the deaths of 5 school children. Two were due to drowning accidents and one to homicide.

MINISTRY OF EDUCATION

MEDICAL INSPECTION AND TREATMENT

Number of pupils on registers of maintained primary and secondary schools (including nursery and special schools) in January, 1964, as in Form 7, 7M. and 11 Schools ... 11707

PART I—MEDICAL INSPECTION OF PUPILS ATTENDING MAINTAINED PRIMARY AND SECONDARY SCHOOLS (INCLUDING NURSERY AND SPECIAL SCHOOLS)

TABLE A.—PERIODIC MEDICAL INSPECTIONS

Age Groups Inspected (By year of birth)	Physical Condition of Pupils Inspected			Pupils found to require treatment (excluding dental diseases and infestation with vermin)				
	No. of Pupils Inspected. (2)	SATISFACTORY		UNSATISFACTORY		Total Individual pupils (9)		
		No.	% of Col. 2	No.	% of Col. 2			
							(3)	(4)	(5)	(6)
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)
1959 and later	9	9	100	—	—	—	1	1
1958	850	849	99.9	1	.1	13	232	240
1957	301	297	98.7	4	1.3	13	73	80
1956	50	50	100	—	—	5	12	12
1955	—	—	—	—	—	—	—	—
1954	—	—	—	—	—	—	—	—
1953	—	—	—	—	—	—	—	—
1952	958	953	99.5	5	.5	86	188	257
1951	28	28	100	—	—	2	6	7
1950	9	9	100	—	—	—	1	1
1949	1050	1042	99.2	8	.8	104	141	234
1948 and earlier	265	263	99.2	2	.8	38	41	73
TOTAL	3520	3500	99.4	20	.6	261	695	905

TABLE B.—OTHER INSPECTIONS

Number of Special Inspections	...	...	2060
Number of Re-inspections	...	...	2541
			<hr/>
Total	...		4601
			<hr/>

TABLE C.—INFESTATION WITH VERMIN

(a) Total number of individual examinations of pupils in schools by school nurses or other authorised persons	...	...	...	...	17867
(b) Total number of individual pupils found to be infested	...	...	...	...	205
(c) Number of individual pupils in respect of whom cleansing notices were issued (Section 54(2), Education Act, 1944)	...	...	...	...	64
(d) Number of individual pupils in respect of whom cleansing orders were issued (Section 54(3), Education Act, 1944)	...	...	...	...	—

PART II.—DEFECTS FOUND BY MEDICAL INSPECTION
DURING THE YEAR

TABLE A—PERIODIC INSPECTIONS

Defect Code No.	Defect or Disease	PERIODIC INSPECTIONS							
		Entrants		Leavers		Others		Total	
		(T) (3)	(O) (4)	(T) (5)	(O) (6)	(T) (7)	(O) (8)	(T) (9)	(O) (10)
(1)	(2)								
4	Skin	27	12	38	10	20	3	85	25
5	Eyes— <i>a.</i> Vision	31	89	142	218	88	118	261	425
	<i>b.</i> Squint	35	22	—	3	8	4	43	29
	<i>c.</i> Other	5	1	3	1	9	2	17	4
6	Ears— <i>a.</i> Hearing	8	17	4	5	2	7	14	29
	<i>b.</i> Otitis Media	10	17	14	8	4	7	28	32
	<i>c.</i> Other	61	20	118	18	100	25	279	63
7	Nose and Throat	63	148	6	11	12	42	81	201
8	Speech	14	21	3	4	2	3	19	28
9	Lymphatic Glands	2	29	1	—	—	10	3	39
10	Heart	3	7	—	1	1	6	4	14
11	Lungs	21	16	8	9	11	11	40	36
12	Developmental—								
	<i>a.</i> Hernia	1	1	—	—	—	—	1	1
	<i>b.</i> Other	3	48	6	16	15	83	24	147
13	Orthopaedic—								
	<i>a.</i> Posture	4	3	—	9	1	9	5	21
	<i>b.</i> Feet	52	23	10	9	27	16	89	48
	<i>c.</i> Other	72	39	19	111	23	32	114	182
14	Nervous System—								
	<i>a.</i> Epilepsy	2	1	—	1	3	2	5	4
	<i>b.</i> Other	1	1	4	3	1	1	6	5
15	Psychological—								
	<i>a.</i> Development	1	12	—	23	3	13	4	48
	<i>b.</i> Stability	2	60	—	2	5	6	7	68
16	Abdomen	—	—	2	3	1	3	3	6
17	Other	6	12	6	11	1	6	13	29

TABLE B.—SPECIAL INSPECTIONS

Defect Code No. (1)	Defect or Disease (2)	Special Inspections	
		Pupils requiring treatment (3)	Pupils requiring observation (4)
4	Skin	47	—
5	Eyes—a. Vision	73	176
	b. Squint	2	—
	c. Other	26	—
6	Ears—a. Hearing	29	83
	b. Otitis Media	25	24
	c. Other	39	9
7	Nose and Throat	77	32
8	Speech	18	2
9	Lymphatic Glands	1	18
10	Heart	4	1
11	Lungs	4	—
12	Developmental—		
	a. Hernia	—	—
	b. Other	4	—
13	Orthopaedic—		
	a. Posture	1	—
	b. Feet	31	2
	c. Other	93	18
14	Nervous System—		
	a. Epilepsy	2	—
	b. Other	2	—
15	Psychological—		
	a. Development	40	—
	b. Stability	5	2
16	Abdomen	2	—
17	Other	213	4

PART III.—TREATMENT OF PUPILS ATTENDING
MAINTAINED PRIMARY AND SECONDARY SCHOOLS
(INCLUDING NURSERY AND SPECIAL SCHOOLS)

TABLE A.—EYE DISEASES, DEFECTIVE VISION
AND SQUINT.

	Number of cases known to have been dealt with.
External and other, excluding errors of refraction and squint	50
Errors of refraction (including squint) ...	419
Total	469
Number of pupils for whom spectacles were prescribed	265

TABLE B.—DISEASES AND DEFECTS OF EAR,
NOSE AND THROAT.

	Number of cases known to have been dealt with
Received operative treatment—	
(a) for diseases of the ear	5
(b) for adenoids and chronic tonsilitis	119
(c) for other nose and throat conditions	7
Received other forms of treatment	369
Total	500
Total number of pupils in schools who are known to have been provided with hearing aids:—	
(a) in 1963	2
(b) in previous years	12

TABLE C.—ORTHOPAEDIC AND POSTURAL DEFECTS

	Number of cases known to have been treated
(a) Pupils treated at clinics or out- patients departments	387
(b) Pupils treated at school for pos- tural defects	—
Total	387

TABLE D.—DISEASES OF THE SKIN

(excluding uncleanliness, for which see Table C of Part 1.)

	Number of cases known to have been treated				
Ringworm—(a) Scalp	—
(b) body	—
Scabies	5
Impetigo	12
Other skin diseases	198
Total	215

TABLE E.—CHILD GUIDANCE TREATMENT

	Number of cases known to have been treated	
Pupils treated at Child Guidance clinics	103

TABLE F.—SPEECH THERAPY

	Number of cases known to have been treated	
Pupils treated by speech therapists	153

TABLE G.—OTHER TREATMENT GIVEN

	Number of cases known to have been dealt with	
(a) Pupils with minor ailments	232
(b) Pupils who received convalescent treatment under School Health Service arrangements	2
(c) Pupils who received B.C.G. vaccina- tion	1151
(d) Other than (a), (b) and (c) above. Please specify:	—
Total (a)-(d)	1385

DENTAL INSPECTION AND TREATMENT CARRIED OUT BY THE AUTHORITY.

Number of pupils on the registers of maintained primary and secondary schools (including nursery and special schools) in January, 1964, as in Forms 7, 7M, and 11 Schools 11707.

(a) Dental and Orthodontic work.

I. Number of pupils inspected by the Authority's Dental Officers:—

i. At Periodic Inspections	...	6053	}	Total I. 7089
ii. As Specials	...	1036		
II. Number found to require treatment	...	...		5071
III. Number offered treatment	...	...		4440
IV. Number actually treated	...	...		2281

(b) Dental work (other than orthodontics). (NOTE: Figures relating to orthodontics should not be included in Section (b).)

I. Number of attendances made by pupils for treatment excluding those recorded at (c)1 below 6069

II. Half days devoted to :—

i. Periodic (School) Inspections	...	44	}	Total II. 1042
ii. Treatment	...	998		

III. Fillings:—

i. Permanent Teeth	...	4216	}	Total III. 5205
ii. Temporary Teeth	...	989		

IV. Number of teeth filled: —

i. Permanent Teeth	...	3520	}	Total IV. 4393
ii. Temporary Teeth	...	873		

V. Extractions:—

i. Permanent Teeth	...	816	}	Total V. 2576
ii. Temporary Teeth	...	1760		

VI. i. Number of general anaesthetics given for extractions ... 892

ii. Number of half days devoted to the administration of general anaesthetics by:—

A. Dentists	...	—	}	Total VI. 72
B. Medical Practitioners	...	72		

VII. Number of pupils supplied with artificial teeth	36
VIII. Other operations:—	
i. Crowns 2	} Total VIII. 946
ii. Inlays 2	
iii. Other treatment 942	

(c) Orthodontics.

I. Number of attendances made by pupils for orthodontic treatment	... ... ...	974
II. Half days devoted to orthodontic treatment	... ... ...	119
III. Cases commenced during the year	... ... ...	68
IV. Cases brought forward from the previous year	... ... ...	34
V. Cases completed during the year	... ... ...	39
VI. Cases discontinued during the year	... ... ...	6
VII. Number of pupils treated by means of appliances	... ... ...	102
VIII. Number of removable appliances fitted	... ... ...	97
IX. Number of fixed appliances fitted	... ... ...	—
X. Cases referred to and treated by Hospital		
Orthodontists	... ... 12 out of 31 referred for treatment or advice only.	

